PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

510970000119011

| Effective October 1, 2000 | | | | | | | | | | | C / . | , , , , , | |
|---|------------------|---|---------------------------------------|-------------------------------|--------------|------------------|----------|--------------------|------------------------|--------|---------------------------|---------------------------|--|
| | | CLAIMS AS | S FILED - (Column | | (Column 2) | | | SMALL ENTITY TYPE | | OR | OTHER THAN R SMALL ENTITY | | |
| TOTAL CLAIMS | | | 23 | | | | Γ | RATE | FEE | 1 | RATE | FEE | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | | BASIC FEE | 355.00 | OR | BASIC FEE | 710.00 | |
| TOTAL CHARGEABLE CLAIMS | | | 2 3 minus 20= | | * 3 | | | X\$ 9= | | OR | X\$18= | 54 | |
| INDEPENDENT CLAIMS | | | <i>う</i> minus 3 = | | * O | | | X40= | | OR | X80= | | |
| ML | JLTIPLE DEPEN | IDENT CLAIM PI | RESENT | | | | | +135= | | OR | +270= | | |
| * If | the difference | in column 1 is | less than zero, enter "0" in column 2 | | | | L | TOTAL | | OR | TOTAL | 269 | |
| | С | LAIMS AS A (Column 1) | MENDED | - PAR (Colur | | (Column 3) | | SMALL I | ENTITY | OR | | OTHER THAN MALL ENTITY | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | | |
| | Independent | * NTATION OF MI | Minus | *** | CLAIM | = | | X40= | | OR | X80= | | |
| _ | TINOT FRESE | NIATION OF WI | JLIIPLE DER | ENDEN | CLAIM | | | +135= | | OR | +270= | | |
| | | | | | | | | TOTAL | | OR | TOTAL ADDIT. FEE | | |
| | | (Column 1) | | (Colui | | (Column 3) | | DDIT. FEE | | | ADDII. FEEI | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * . | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | | |
| | Independent | * NTATION OF MU | Minus | *** | CLAIM | = | | X40= | | OR | X80= | | |
| <u> </u> | I MOI I NEOL | NIATION OF INC | DETIT EE DET | LINDLIN | CLATIVI | | | +135= | | OR | +270= | | |
| | | | | | | | | TOTAL DDIT. FEE | | OR | TOTAL ADDIT. FEE | | |
| | | (Column 1) | | (Colur | | (Column 3) | | | | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | 3h . w | HIGH NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | | |
| | Independent | * | Minus | *** | | = | | X40= | | | X80= | | |
| _ | FIRST PRESE | NTATION OF MI | JLTIPLE DEF | PENDENT | CLAIM | | │ | | | OR | | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | +135= | | OR | +270= | | |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." | | | | | | | | | | | | | |
| | The "Highest Num | ber Previously Pai | d For" (Total oi | r Independ | ent) is the | highest number | r foun | d in the app | ropriate box | in col | umn 1. | | |